

W. EDWIN KEE, JR. SECRETARY

DE ONLY (8 FAX (3

(302) 698-4500 (800) 282-8685 (302) 697-6287

MEMORANDUM

TO: Persons Wishing to Apply for a Permit to manufacture, process, pack or

hold for introduction into commerce "on-farm home processed" food.

FROM: Delaware Department of Agriculture

DATE: March 28, 2012

SUBJECT: Notice of availability of Permit in accordance to State Regulations for On-

Farm Home Processing of Non-Potentially Hazardous Foods.

This memorandum serves as a notice to all farm owners wishing to manufacture, process, pack or hold for introduction into commerce "on-farm home processed" food.

Enclosed you will find an application in compliance with Delaware Code Title, 3, Chapter1 and 3 and Sections 101 and 302. Please complete the application and return it to the address listed on the top of the application. The **annual fee** is \$25.00, payable to the Delaware Department of Agriculture.

If you should have any questions pertaining to the above permit, please feel free to contact the Delaware Department of Agriculture, Food Products Safety Administrator at (302) 698-4545 or andrea.jackson@state.de.us.

Upon receipt of this application, you will be contacted to schedule a facilities inspection. A permit will be issued provided all necessary documentation of training and facility related permits are submitted.

CH:dlw

Enclosure



Telephone (302) 698-4545 DE Only (800) 282-8685 Fax (302) 697-6287

Application for On-Farm Home Processing of Non-Potentially Hazardous Foods

Application for a permit to manufacture, process, pack or hold for introduction into commerce "on-farm home processed" food. The Delaware Department of Agriculture may issue an on-farm home food processing operation permit to an individual who owns a farm, to process non-potentially hazardous food in a home or domestic kitchen located on the individual's farm as set forth by regulation. (In compliance with Delaware Code Title, 3, Chapter1 and 3 and Sections 101 and 302).

Please complete the following information	(print or type):		
Farm Name (if named)			
Farm Owner			
Mailing address			
CityState	ZipPhone		
Geo-reference coordinates (latitude/longit	ude, state plane coor	dinates NAD83) (<u>DDA</u>	(can provide)
Type of Non-potentially hazardous foods be	eing processed:		
Owner's signature			
"This is an equal opportunity program. If you color, national origin, sex, age, religion or handic			
The <u>annual fee</u> for a permit is \$ Agriculture.	25.00 and is payab		Department of
CHECK/MONEY ORDER	"	CREDIT CARD	
Fee - \$25.00		Fee - \$25.00	
	☐ Visa Billing Name:	☐ MasterCard	Discover
Make Check or Money Order	Billing Address:		
Payable to:	City/State/Zip: Credit Card		
	Number:		
Delaware Department of Agriculture	Expiration Date:	/	
	Authorization:	Month Y	'ear